

Application Data Sheet

Application Information

Application Number:: 10/734,372
Filing Date:: December 12, 2003
Application Type:: Regular
Subject Matter:: Utility
Suggested Group Art Unit:: 1649
CD-ROM or CD-R?: None
Title:: Method for Determining
Sensitivity to Environmental
Toxins and Susceptibility to
Parkinson's Disease
Attorney Docket Number:: 023868.43877
Request for Early Publication?: No
Request for Non-Publication?: No
Suggested Drawing Figure:: 0
Total Drawing Sheets:: 0
Small Entity?: Yes
Petition Included?: No
Secrecy Order in Parent Appl.?: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name:: Wood
Family Name:: Williams
Name Suffix:: III
City of Residence:: Memphis
State or Province of Residence:: TN
Country of Residence:: US
Street of mailing address:: 721 Eaton Street
City of mailing address:: Memphis

State or Province of mailing address:: TN
Postal or Zip Code of mailing address:: 38120

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Michelle
Middle Name::
Family Name:: Smeyne
Name Suffix::
City of Residence:: Collierville
State or Province of Residence:: TN
Country of Residence:: US
Street of mailing address:: 10394 Hulsey Circle
City of mailing address:: Collierville
State or Province of mailing address:: TN
Postal or Zip Code of mailing address:: 38017

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Richard
Middle Name:: Jay
Family Name:: Smeyne
Name Suffix::
City of Residence:: Collierville
State or Province of Residence:: TN
Country of Residence:: US
Street of mailing address:: 10394 Hulsey Circle
City of mailing address:: Collierville
State or Province of mailing address:: TN
Postal or Zip Code of mailing address:: 38017

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Ruby
Middle Name:: Cook
Family Name:: Tharpe
Name Suffix::
City of Residence:: Olive Branch
State or Province of Residence:: MS
Country of Residence:: US
Street of mailing address:: 11690 Miller Road
City of mailing address:: Olive Branch
State or Province of mailing address:: MS
Postal or Zip Code of mailing address:: 38654

Correspondence Information

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E-Mail address:: susan.fentress@butlersnow.com

Representative Information

Representative Customer Number::	28172	
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
10/734,372	Non-Provisional of	60/433,437	12/13/2002

Assignee Information

Assignee Name:: St. Jude Children's Research
Hospital
Street of mailing address:: 332 North Lauderdale Street
City of mailing address:: Memphis
State or Province of mailing address:: TN
Postal or Zip Code of mailing address:: 38105

Assignee Information

Assignee Name:: University of Tennessee
Research Foundation
Street of mailing address:: 920 Madison Avenue, Suite 515
City of mailing address:: Memphis
State or Province of mailing address:: TN
Postal or Zip Code of mailing address:: 38163

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